1	2	3	4	5
Manipur	7000	8400	8000	6000
Meghalaya	1000	1500	3000	1000
Nagaland	2000	3000	1500	1000
Sikkim	1170	1400	400	1000
Tripura	11000	2300	2200	3000
A & N Islands	1880	1900	1800	1000
Arunachal Pradesh	2400	3000	900	2000
Chandigarh	2800	8000	8000	410
D & N Haveli	700	200	700	140
Delhi	41250	90000	344250	9000
Goa	3980	3000	10000	3000
Daman & Diu	330	200	800	140
Lakshadweep	90	200	1700	490
Mizoram	1310	2700	2921	1000
Pondicherry	4600	4000	7900	1000
M/o Defence	20400	17325	53800	4000
M/o Railways	30600	17325	350700	5000
Commercial	—	—	6000000	2000000
ALL INDIA	5275640	6384450	16471571	4581180

Production of medicines

2105. SHRI RAMA-CHANDRAN PILLAI : Will he Minis er of HEALTH AND FAMILY WELFARE be pleased o state :

(a) whe her Government are aware ha he Indian drug marke is being bursting at he seams with about 75 thousand formulations most of which have no scientific basis a: all ;

(b) whe her the drugs for 'uber-culosis, malaria, anaemia, leprosy and Vitamin A are being produced adequaely to reat (he crores of affected people in the country ; and

(c) if not, what are the reasons therefor ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI MATI D.K. THARADEVI SIDDHARTHA) : (a) Thousands of licensed manufac urers market the same formulation under different brand names, different dosage forms and different pack sizes to meet the market demand, As a result, total number of formulations moving in the Indian market appear large. How ever, it is not correct to say that these are unscientific formulations.

(b) and (c) Yes, Sir. The formulations required for such treatment are

being adequately manufactured to meet the domestic requirements.

Installation of population clocks

2106. DR. SANJAYA SINH : SHRI SURESH PACHOURI :

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to stats :

(a) whether Government pro pose to instal population clocks at strategic locations in cities and towns in the country ;

(b) if so, what *art* the details in this regard ;

(c) what would be the approximate cost of such a clock and who will manufacture them ; and

(d) how t.he Government proposes to meet the cost of these clocks ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARADEVI SIDDHARTHA) : (a) and (b) It is proposed to instal a popula ion clock at prominent places in she cities/town of India depending on availability of funds. These clocks. besides time will show increase in population every minute or fraction thereof as also messages on various aspects of Family Welfare. The entire electronic system would be illuminated.

(c) and (d) Hindus an Machine Tools a Public Under aking, is fabricating these clocks. The cost of one clock with moving messages at present is approximately Rs. 14-35 lacs which includes ins alia ion cost and taxes. Expendi ure on those such clocks two of which are at present under produc ion by HMT is being met by UNFPA. The present cost of clocks with fixed messages is Rs. 6-30 lacs and the cost of two such clocks is being met by the Govt, of Australia through UNFPA.

National Goitre Control Programme

2107. SHRI RAMA-CHANDRAN PILLAI : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to
state :

(a) what are the areas identified on Chronic "Iodine-deficiency" areas ;

(b) what are the areas covered under the "National Goitre Control Programme";

(c) whether it is a fact that the expenditure on above programme has been cut this year ;

(d) whether Government are aware that more than 80 per cent families have a Goitre victim in the village Nanpur, District Ghaziabad, U.P. ; and

(e) if so, what special effor s Government have made in this direction ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARADEVI SIDDHARTHA) : (a) and (b) Statement showing areas identified as Chronic Iodine Deficiency and covered under National Goitre Con rol Programme is annexed. (See *below)-*

(c) Plan provision on the National Goitre Control Programme has been tentalively reduced during the current year as the subsidy which was being paid to the Salt Manufacturers for iodisa ion of salt has since been discontinued with effect from 1-3-92.

(d) According to survey conducted by Central Goitre Survey Team of D e. General of Health Services in 1987 the overall-Goitre prevalance in Nanpur village of Ohaziabad, District was 28-4%.